Adverse Childhood Experiences: Breaking the Generational Cycle of Crime

An Overview
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### Acronyms and Definitions

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<th>Acronym</th>
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<tr>
<td>ACE</td>
<td><strong>Adverse Childhood Experience</strong>: stressful experiences occurring during childhood that directly hurt a child (e.g. maltreatment) or affect them through the environment in which they live (e.g. growing up in a house with domestic violence).</td>
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<tr>
<td>BCU</td>
<td><strong>Basic Command Unit</strong>: The structure of a police force area is broken up geographically into smaller operational areas. South Wales Police has four BCUs: Central, Eastern, Northern and Western.</td>
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<td>NCALT</td>
<td><strong>National Centre for Applied Learning Technologies</strong>: Established to assist the 43 Home Office police forces in England and Wales and the wider policing community in adopting alternative learning methodologies.</td>
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<tr>
<td>NPT</td>
<td><strong>Neighbourhood Policing Team</strong>: A local approach to policing consisting of Police Officers, Police Community Support Officers (PCSOs), Special Constables, police staff and volunteers.</td>
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<td>PC</td>
<td><strong>Police Constable</strong>: A police officer of the lowest rank.</td>
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<tr>
<td>PCSO</td>
<td><strong>Police Community Support Officer</strong>: Uniformed staff that support Police Officers and work to reassure the public, provide crime prevention advice and assist with enquiries.</td>
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<td>PPN</td>
<td><strong>Public Protection Notice</strong>: An information sharing document in which SWP staff record safeguarding concerns.</td>
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<td>PPU</td>
<td><strong>Public Protection Unit</strong>: A police unit which provides governance and oversees safeguarding issues. Its duties include strategic development of child protection (including child sexual exploitation), domestic abuse, vulnerable adults, missing persons, rape and serious sexual offenses. All PPNs submitted by SWP staff are risk-assessed in a PPU.</td>
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<tr>
<td>PS</td>
<td><strong>Police Sergeant</strong>: An operational senior rank responsible for supervising a shift of constables and allocating duties.</td>
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<td>SWP</td>
<td><strong>South Wales Police</strong>: The largest of four territorial police forces in Wales.</td>
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Overview

The ‘Adverse Childhood Experiences: Breaking the Cycle of Crime’ project has been built on previous research from 2015 carried out by Public Health Wales which indicated that 47% of adults living in Wales (aged 18-69 years) have experienced more than one Adverse Childhood Experience (ACE), such as physical abuse, parental incarceration and domestic violence, with 14% having experienced four or more ACEs before the age of 18. There was a cumulative effect of ACEs, compared with individuals with no ACEs; those who had experienced four or more were 14 times more likely to have been a victim of violence, 15 times more likely to have committed violence against another person in the last 12 months, and 20 times more likely to be incarcerated at any point in their lifetime.

The current project was undertaken as part of the Police Innovation Fund (PIF) “Early Intervention and Prompt Positive Action: Breaking the Generational Cycle of Crime”, with the key aim (through a collaborative approach within South Wales Police (SWP), Police and Crime Commissioner, NSPCC, Barnardo’s, Bridgend County Borough Council), to understand and address responses to vulnerability through a shared agenda for public services in Wales. Intervening at the earliest opportunity is well acknowledged as an approach that many Police Forces are keen to implement. As part of the PIF project, three core objectives were identified and provide the subsequent focus within this Overview report in achieving the wide aim of understanding, identifying and responding to vulnerability through a shared agenda:

Objective 1: Understanding the current systems and processes for responding to ACE related issues and the opportunities for change from a wider perspective than just police:

The aim of this objective was to gain an understanding of the current systems and processes for responding to vulnerability and the opportunities for systemic change for the police and their partners; how the police can improve; what vulnerability means and how to identify it; and to raise awareness of the prevalence of ACEs in an offender population.

Objective 2: Intervening earlier using the opportunities and evidence identified for prompt, positive action that is efficient and effective:

The aims of this objective were to develop and test systems, practices and processes that were ACE-informed; develop and test a training and support model for the police and their partners to raise awareness of ACEs; and devise a decision support tool to aid officers when supporting those displaying mental health issues.
Objective 3: Prevent the root causes of crime in collaboration with key partners:

Partnership working is a key factor in ensuring those experiencing ACEs are supported effectively. This objective focused on the Housing and Education sectors and effecting cultural change across the system. Included in this was the development and testing of an ACE-informed whole school training and support model for schools and the identification of opportunities for ACE-informed practice in other key areas where vulnerability can be present. Knowledge sharing between agencies was also explored. The focus on Housing allowed training to be delivered to staff within the Housing sector to enable effective identification and response to vulnerability (and especially acknowledge the prevalence of ACEs for those at risk of homelessness).

A key principle of the project was taking a Public Health Approach\(^1\), to ensure the project achieved this a large scale research study was conducted involving various key partners allowing for a fuller picture in terms of current processes and understanding of vulnerability, alongside evaluations of a number of pilot projects looking at how ACE-informed training/approaches were perceived across the various sectors. Each report is available in full and includes:

1. **Adverse Childhood Experiences: Breaking the Cycle of Crime – Turning Understanding into Action.**

2. **An evaluation of the Adverse Childhood Experience (ACE)-Informed Approach to Policing Vulnerability Training (AIAPVT) pilot.**

3. **An Evaluation of a structured multi-agency, early intervention approach to vulnerability with neighbourhood policing teams.**

4. **An evaluation of the Adverse Childhood Experience (ACE)-Informed Whole Schools Approach.**

5. **Adverse Childhood Experiences and Housing Vulnerability – Report and Evaluation of ACE-informed Training for Housing.**

Adverse Childhood Experiences: Breaking the Generational Cycle of Crime

The research explored the policing landscape when responding to vulnerability by evaluating the ACE-informed vulnerability training and early collaborative processes between police and partners. Overall, it has provided key insights regarding how multi-agency organisational processes and practices could better meet the needs of vulnerable individuals by intervening at the earliest opportunity, providing essential and early support to vulnerable children and families.

EVERYONE has a role to play in understanding and responding to vulnerability.

- Training resulted in greater awareness and improved staff confidence to respond to vulnerability across all sectors.
- Independent, expert ACE-informed trainers provided greater credibility.
- ACE-informed practice seen as ‘daily task’ including more measured responses and greater lines of enquiry.
- Education and Housing sectors uniquely placed to identify and support vulnerable individuals.
- Streamlined information sharing processes resulted in increased and relevant cross-partner communication.
- Improved engagement with children and families through enhanced supportive NPT role.
- More detailed information provided on Public Protection Notifications.
- Improved understanding of responsibilities and thresholds to safeguarding and vulnerability of partner agencies.
- Recognition of increased need to work together locally with partners and wider community, building wider resilience.
Objective 1:
Understanding the current systems and processes for responding to ACE related issues and the opportunities for change from a wider perspective than just police:

The first publication from the PIF project explored in depth, the current policing landscape when responding to vulnerability, with this work undertaken with SWP. The key objectives of the report were to understand current working, key systems and processes in responding to vulnerability. Furthermore, a more operationally grounded qualitative approach explored Police Officers’ perceptions when responding to vulnerability. Additionally, a wider public perspective on vulnerability and the police’s role was also examined.

Scale and complexity of vulnerability demand within policing:

Since 2008/2009, demand for SWP has changed dramatically, with a 27% reduction in crime and a 30% increase in public welfare and safety issues. In 2015, 89% of police contact with the public was classified as complex welfare, public safety and vulnerability issues. The current research findings demonstrate the scale of vulnerability demand that the police respond to. Traditional policing methods, training and systems are not designed to meet this level and type of demand and have been explored as part of the research.

The Public Protection Notification (PPN) is an information sharing document used to record safeguarding concerns. These are completed and then risk assessed by the Public Protection Unit (PPU) before being shared with services where appropriate. The current system of generating and risk assessing each PPN is estimated to cost the police alone £600k per year in the Bridgend area and could be as high as £4million across SWP. This highlights the requirement to evaluate this system of response to vulnerability, so that we are able to understand if any alternative, or modified processes could more effectively identify, mitigate and address vulnerability.

Analysis of 61,590 PPNs in 2016 indicated that in a year, just under a third of individuals had more than one PPN submitted, with ranges reaching up to 84 PPNs. In addition, of those PPNs that were referred onto a statutory partner agency, only 3.2% of child referrals resulted in care and support plans, with 4.2% of adult referrals identified as requiring further action (e.g. Social worker or safeguarding input). Moreover, the complexity of the key procedures, policies and guidance highlighted within the process map may explain some of the difficulties police encounter when dealing with the various forms of vulnerability.
Adverse Childhood Experiences: Breaking the Generational Cycle of Crime: An Overview

The research team conducted almost 400 hours of observations of operational policing, covering the whole SWP force area, across different roles and shift patterns. Interviews and focus groups were undertaken with frontline Police Officers and Police Community Support Officers, Public Service Centre staff and Public Protection staff. Interviews with staff from partner agencies who receive police safeguarding referrals were conducted to examine their perceptions on multi-agency working and the referral process. In addition, focus groups were held with the public to explore expectations of the response to vulnerability by the police and other agencies.

Key findings indicated that within policing there was a good understanding of vulnerability, but a more varied understanding on the impact of trauma on behaviour and specific knowledge around ACEs. In addition, police respondents acknowledged variances across SWP in regards to the capacity and opportunity to assess and respond to vulnerability. With this it was also felt that the responsibility of addressing vulnerability fell outside of the remit of policing, recognising the need for a culture shift among police and partners. Interestingly, the public’s perception centred on the police as responsible for and responding to crime. The research acknowledged that the current provision of training around vulnerability was inadequate in providing officers with the appropriate level of knowledge and skills to confidently address vulnerability and trauma. It was also recognised that vulnerability demand was having an adverse effect on police officers’ own wellbeing.

An analysis of PPNs submitted in 2016 indicated ...

- **61,590 PPNs** related to **57,364 occurrences**
- **47%** related to emergency incidents (Grade 1)

- **66%** were for females
- Average age: **34 yrs, 0–105 yrs old**
- Monthly PPN volume increased
  - January 2016: 4,639 PPNs
  - December 2016: 5,249 PPNs (13% increase)

- **31%** of individuals had more than one PPN submitted in the year
- The number of PPNs for an individual ranged from **1–84**
- On average the amount of time between repeat PPNs decreased with each incident

**Partner referrals**
- **63%** were referred to a partner agency. Repeat PPNs were more likely to be shared

**Outcome of PPN referrals to a statutory partner agency**
- **Child referrals**
  - **72%** were closed and logged as an enquiry
  - **3.2%** resulted in a Care and Support Plan. This was more likely to be put in place when PPNs had multiple natures of concern
- **Adult referrals**
  - **80%** were closed
  - **16%** were sent to Social Services Team for screening
  - **4.2%** resulted in a need for further action (i.e. social worker or safeguarding input)

* A sample of 15,928 PPNs for 9,064 subjects. * A sample of 1,394 PPN referrals to Children’s Services and 600 referrals to Adult Social Services.

Objective 2:
Intervening earlier using the opportunities and evidence identified for prompt, positive action that is efficient and effective:

Objective one of the PIF project developed a platform of much needed understanding around policing demand and response to vulnerability and informed five key recommendations for action across the SWP force. Recommendation One was to build a structured multi-agency, early intervention approach to vulnerability within Neighbourhood Policing Teams (NPTs); and Recommendation Two to develop ACE-Informed Approach to Policing Vulnerability Training.

The first step in developing opportunities for prompt, positive action is being able to understand vulnerability, the various forms it may present and how this relates to ACE-informed approaches. Therefore, the focus of this objective is to highlight key findings from the ACE Policing Vulnerability Training, thus evidencing the need for expert, independent trainers in delivering ACE-informed approaches to the frontline. In addition, the key findings from the evaluation of the process, change of the trial and test arrangements of the new multi-agency early intervention collaborative approach to policing vulnerability are highlighted.

**Adverse Childhood Experience (ACE)-Informed Approach to Policing Vulnerability [Report 2]**

Through the work highlighted in Objective One, a key area that was identified requiring further development was the need for increased awareness of vulnerability, trauma and ACEs within SWP and partner agencies. Consequently, work commenced in developing the ACE Policing Vulnerability Training by ACE coordinators from NSPCC and Barnardo’s. The training covered the impact of trauma on development; defined ACEs and outlined their impact on life outcomes; multi-agency working; tactical skills for working with trauma and promoting resilience in children. This mandatory training was delivered to all frontline staff including operational and neighbourhood policing teams in a pilot area in South Wales across two months in 2017. The training aimed to provide SWP staff with an understanding of the impact of ACEs and trauma-informed interventions as well as tactical options to increase the competency and confidence of police when responding to vulnerability.
The evaluation comprised of pre and post questionnaires and a validated scale to measure Attitudes Related to Trauma-Informed Care (ARTIC-35)\(^2\) with training participants and follow up one to one interviews with a randomly selected number of participants, training providers and wider SWP staff involved in its delivery. The evaluation aimed to examine if participation resulted in increased ACE awareness and to explore the impact on policing practice, including staff confidence of responding to vulnerability. It also sought to understand how the training could be rolled out across the wider force and to different staff roles.

**Key findings post training:**
- ARTIC scores were significantly higher;
- Participants reported improved confidence in responding to vulnerability;
- Staff recognised positive changes in their own judgements towards individuals, a more measured response in their behaviour when responding to calls and utilising greater lines of enquiry to understand the root causes of behaviour;
  - As a result of their greater understanding, they subsequently included more detailed information (i.e. risks observed) on the PPNs they had submitted following the training;
- A greater understanding of the additional support available within the local community and reported increased confidence to seek support and make early help referrals when required;
  - Some staff reported submitting early help referrals as a result of the training.

**Evaluation of a structured multi-agency, early intervention approach to vulnerability with neighbourhood policing teams [Report 3]**

The research findings highlighted under Objective One identified the challenges faced by frontline officers across South Wales Police in working with vulnerability using current methods of policing, systems and processes. It was recommended that a new approach be developed to address the lack of action for most PPNs, to ensure vulnerable people get the help they need when they need it and to enhance the role of NPTs to work collaboratively with Local Authority and other partners at the earliest point. A structured multi-agency, early intervention approach to vulnerability as a collaboration between NPT and Early Help teams was developed to identify early intervention for vulnerable children and families following police contact.

These new arrangements allow safeguarding PPN referrals to detail the number and type of ACEs identified and to create a pathway of support for those who do not meet statutory thresholds, but may benefit from early intervention. Action plans are developed following an initial assessment, which may include joint visits between police and Early Help to the family home, child's school and/or referrals to other services. Experienced social care practitioners were employed as tactical

\(^2\) Please note, internal reliability scores for the ARTIC tool indicate potential validity issues for use with the cohort groups in this evaluation. Further work is underway, seeking to adapt and develop a tool that is relevant for policing and partner cohorts.
supervisors to support police and partners to develop and embed ACE- and trauma-informed collaborative practices and process change. They also provided support to operational staff during joint visits and screening, and conducted quality assurance and case reviews of families supported by the new collaborative arrangements.

A pilot of the new multi-agency approach has been operational since 26th June 2017 to trial and test the new arrangements with Bridgend County Borough Council (BCBC) Early Help Teams. An independent evaluation of the new approach was carried out to understand the process changes and the impact of the early intervention collaborative approach. It also sought to investigate the longer term impact of the ACE Policing Vulnerability Training on policing practice, and inform further development and sustainability of the approach for roll out and scale up at both a regional and national level. Face-to-face interviews were held with operational police staff, Early Help practitioners, ACE coordinators and project leads.

**Key findings:**

- The approach was positively received by both SWP and Early Help and strengthened the relationship between police and the BCBC Early Help team;
- The process of identifying and responding to vulnerability has been streamlined through co-location of the police and Early Help, reducing time and improving communication between partners;
  - There are concerns for the sustainability of screeners being given dedicated time to complete tasks as part of their daily workload;
- The ACE coordinators played an integral role in the success of the pilot, providing specialist knowledge and practical support to operational activities to embed a trauma-informed approach into daily practice, to influencing culture change and supporting the collaboration between the police and Early Help;
  - There is a need for continued efforts to change the culture within the police to see vulnerability as their responsibility and incorporate this into the vision of policing;
- Enhanced supportive role of NPTs employed within the community improved engagement with children and families;
- Interviews indicated that officers were able to put their training into practice, with identifying ACEs becoming embedded in their operational duties and perceived to be a daily task;
- Although there is a need for further refinement of the processes, police and partners recognised the impact early intervention can have on reducing future police demand, and supported the idea of continued implementation of this approach and roll out across SWP and wider partners.
Objective 3:
Prevent the root causes of crime in collaboration with key partners:

To effectively support vulnerable individuals’ agencies need to work collaboratively. It is recognised that partnership working is a key factor in ensuring those experiencing ACEs are supported by the right person in the timeliest and most effective way. As part of this project the Education and Housing sectors were recognised as being uniquely placed to identify and support vulnerable individuals most at-risk. Sector specific ACE-informed training and support models based on the ACE Policing Vulnerability Training were developed. The focus of this objective is to highlight the key findings of the evaluation of the ACE-informed whole school approach pilot and the ACE-informed training for Housing.

ACE-Informed Whole School Approach [Report 4]

Education professionals are especially well-placed to support children with adversity and to help build the protective factors that enables them to be resilient against trauma. Developing ACE and trauma-informed practices within schools can enable all staff to have the appropriate knowledge and skills to identify and then in turn respond appropriately to ACEs, providing a safe learning environment for all children.

The ACE-informed Whole School Approach programme was developed to introduce trauma-informed practices to schools, and comprised a number of elements; (1) an ACE readiness tool to scope current provisions in schools and gaps that may impede the adoption of an ACE-informed approach; (2) a whole school training programme to improve awareness of ACEs and knowledge and skills of working with children who are affected by trauma; (3) an action plan identifying areas for development and requirements to sustain the approach.

The schools programme was developed and facilitated by the Education ACE coordinators, Education Psychology Service and healthy schools practitioner. Piloted in three primary schools in the Maesteg area between September and December 2017, an independent evaluation was carried out to develop an understanding of how the approach has embedded into everyday practice, the impact of the training on knowledge and skills of staff working with children, considerations for further development of the programme and potential for national roll out to all schools.
in Wales. School staff attending the training completed pre and post training questionnaires and ARTIC-35 scale. Face to face interviews were held with school staff and those involved in the development and implementation of the approach.

**Key findings:**

- The ACE readiness tool was considered an impactful self-evaluation tool essential to developing an ACE-informed school approach;
- The training provided all school staff with a universal understanding of ACEs and trauma, and the skills to act as a trusted adult in supporting children;
  - Staff had a more positive attitude towards trauma-informed care and had a greater confidence in adopting an ACE-informed approach into every day practice;
- The approach was positively received by all schools, and staff recognised the importance of pupil wellbeing in academic attainment;
  - There were concerns about the level of support teachers can provide children with ACEs considering the growing demands placed on schools to meet academic standards and Welsh Government priority areas;
- It was widely accepted that the approach should be rolled out to schools across Wales. However, there is a need for the training to be adapted for delivery to secondary schools and larger staff teams, and for a greater focus on building resilience in children and managing behaviours associated with trauma;
- There is a need for greater collaboration between schools and other services (i.e. police and Early Help) and a wider community approach to addressing ACEs.

**ACE and Housing Vulnerability – Report and Evaluation of ACE-informed Training for Housing [Report 5]**

The report on the evaluation of ACE-informed training for Housing highlighted that the Housing sector is in an exceptional position to be able to recognise and respond to ACEs at the earliest opportunity and in the most appropriate and effective way. It already plays a strong role in supporting vulnerable tenants with the aim of sustaining tenancies and preventing crises occurring, and linking in with support services and other agencies when need is identified. The Housing sector is an essential part of a systems-wide response to ACEs across the life-course, because of their prime access to, and relationship with, vulnerable individuals and households; and has a unique opportunity to contribute to the bigger societal ambition of breaking the generational cycle of ACEs thus reducing the risk of poor outcomes, such as crime, violence, anti-social behaviour, and homelessness. There is growing evidence to suggest that ACEs can lead to vulnerability in adults, impact health and life chances, and contribute to adverse housing outcomes. Good quality housing is fundamental to good health and wellbeing, having a home is a basic need, and it is where adults and children spend a large proportion of their time.
The ACE-Informed Training for Housing resource was developed by a multi-agency approach through consultation with Housing representatives from different tenures across Wales, and aims to raise awareness of and increase confidence in responding to ACEs and vulnerability in the Housing sector. The training was piloted in Bridgend in October 2017 in the social Housing sector, Local Authority, and support services. It included a one-day training session on five separate occasions. The audience on each day was made up of representatives from the four registered social landlords (RSLs) that service Bridgend, Gwalia, Third Sector housing support agencies (Llamau, Shelter, the Wallich), and officers from BCBC (Housing, Social Service, and Early Help).

Attitudes towards taking a trauma-informed approach were measured using the ARTIC-35, as seen in previous evaluations with scores taken pre and post from all participants at each of the five-day training sessions. In addition, semi-structured face to face interviews took place one month after the ACE-informed training, designed to explore the participant’s perceptions and experience of the training, the impact of the training on practice, and perceptions of future roll out of the training.

**Key findings post training:**

- Increased confidence in responding to vulnerability in tenants, by adopting a trauma-informed approach to ACEs;
- Increased awareness, which enabled staff to recognise the impact ACEs have on vulnerability and life-course, and increase understanding of how a trauma-informed approach can help;
- Improved understanding of different job roles and services helped them understand the thresholds of different agencies and to improve working together locally;
- Training allowed staff to look at existing vulnerable tenants through an ACE-lens and person-centred approach.
Conclusions and Recommendations

Understanding gained from exploring SWP current systems and processes for responding to vulnerability and ACE related issues alongside the exploration of opportunities for systematic and cultural change for police and partners resulted in five overarching key recommendations for action across the SWP force:

1. Pilot a structured multi-agency, early intervention approach to vulnerability with Neighbourhood Policing Teams

2. Pilot a training programme with ‘fast’ and ‘slow time’ policing using an ‘ACE-Informed Approach to Policing Vulnerability’

3. Work with the police Public Protection Department to develop an ACE informed approach to the existing Public Protection Notification process

4. To develop with partners a 24/7 ACE-informed approach to responding to vulnerability

5. Work with Human Resources to assist with the development of the well-being agenda within South Wales Police, specifically focusing on how staff are mentored and supported to deal with vulnerability

There were a number of key themes that emerged from across the various work streams\(^3\) that looked to trial and test several of the overarching key recommendations within the Police Innovation Fund (PIF) “Early Intervention and Prompt Positive Action: Breaking the Generational Cycle of Crime”.

\(^3\) Specific recommendations for each work stream can be accessed within the individual full reports.
1. **Everyone has a role to play in understanding and responding to vulnerability**

A key finding across all projects was the huge benefits of an ACE-informed approach in responding to vulnerability within the work of each of the sectors explored. There was clear agreement from those that engaged in ACE-informed training that everyone has a role to play in understanding trauma and responding appropriately.

“I look at ACEs as an opportunity to change the culture within our school, to really peel back and look at wellbeing as a prerequisite to effective learning. Not only for the children, but for the staff as well, because if we deal with bad behaviour in a way which upsets us or causes our anxieties to increase, then we aren’t going to be good practitioners.” (Report 4)

2. **Independent, expert, ACE-informed trainers**

One of the consistent messages across the ACE-informed training was the benefit of using independent experts to deliver the training. Across all sectors, an independent expert gave additional credibility and quality assurance in the delivery. ACE coordinators were seen as providing specialist knowledge and practical support across all workforces. It was also noted that the use of ACE coordinators in delivering wider parallel training would allow for a consistent, ACE-informed approach across all sectors dealing with vulnerability.

“It’s significant the impact…that they’ve had in that role, but it’s a dual role, so it’s the training and delivering the training, and being very credible in delivering that training having that expert knowledge to deliver…. The other part of their role is the workforce development…how they move alongside that workforce and support them in their changing practice.” (Report 3)

3. **Improved confidence to take learning into practice**

After completing training on ACE-informed approaches, practitioners across all sectors reported increases in confidence in being able to identify ACEs and vulnerability. This increase in understanding led to practitioners recognising vulnerability within their everyday activities, often not being addressed. Subsequently from the training and confidence gained by practitioners, reports early on indicated that some behaviours were leading to action, such as taking a more measured response in their own behaviour, recording more relevant information within their organisations’ systems, and utilising wider lines of enquiry to understand and respond.

“It’s a…daily task now… if it’s not going out and speaking to a family, or…phoning a family or going out with a support worker to do…a joint visit, it’s going around and seeing them. How’s everything going? We’re in contact with the schools a lot…[we’re] putting…everything we’ve learned in training into play” (Report 3)
4. **Sharing information. Shared agenda. Working together across sectors**

Across the separate projects, there was recognition of an increased need to work together locally with relevant partners (e.g. holding regular joint workshops or joint training) to ensure that workforces are aware of the support services that are available, to enable effective signposting. The SWP pilot highlighted that by working together locally, these relationships were strengthened, with more streamlined processes developing allowing increased and relevant cross-partner communication.

It was acknowledged that even within organisations the sharing of information can be limited (e.g., education participants talked about the sharing of information of school children identified with ACEs to allow others that come into contact to have the required understanding when engaging with the young person). Consequently, short-term aims should consider encouraging the sharing of vulnerability information within organisations in more accessible formats and how these can then inform those outside the organisation. Fewer barriers to accessing support services and sharing data, and a policy drive at national level, are required.

"When we look at outcomes such as improved relationships, improved data sharing, improved joint decision-making about risk, they’ve all been successful." (Report 3)

5. **Leadership role: Top to bottom engagement in the ACEs agenda**

Across all sectors there was a clear desire and understanding of the benefits of enabling an ACE-informed approach, however, all commented on the high demand of the day job that limits opportunities and time to engage with those not reaching thresholds, with conflicting messages from leaders about priorities. Many mentioned lack of resources to pick up ‘lower risk’ issues, such as vulnerability, ultimately reinforcing reactive, crisis-driven responses. (Schools talked about levels of support for pupil wellbeing versus academic standards required to meet; Police emphasised crime issues and public perceptions, versus high demand of vulnerability with limited powers and pathways of early help).

“It’s an opportunity to change the culture within our school, and to readdress the pressure put onto us in terms of delivering an in-balance curriculum, and the demands put on us by Estyn....... And I think this is why we want to really peel back and look at wellbeing as a prerequisite to effective learning” (Report 4)
6. Wider community involvement – building resilience

Linked to the above point, in working together across sectors there was an awareness of sharing knowledge on vulnerability and ACE-informed approaches to parents and wider communities, which in turn would help build community resilience. This would allow communities themselves to recognise and understand vulnerability (e.g., shopkeepers, children’s play centres) and be aware of what referral pathways/services may exist. This approach would truly enable a community-wide response to ACEs across the life-course.

“It would be good to involve counsellors within the community because they are having to pick up some of the problem after school behaviour, which perhaps the police are involved [in] already” (Report 4)

7. Long term evaluation and scale up

Further longer-term evaluation is required to assess the effectiveness of ACE-informed approaches to vulnerability and evidence how best to sustain an ACE-informed approach to vulnerability nationally. This needs to include:

- Trained practitioners perceptions of ACE-informed approaches to responding to vulnerability at different time points post training;
  - Cultural transmission – related to the above, how those trained practitioners influence perceptions and responses of colleagues, and others, when considering ACE-informed approaches;
- Outcomes for individuals and the wider family: does it improve outcomes? How and why? These are key questions to be able to maximise the evidence base for ACE-informed approaches;
  - Related to this, statistical analysis should seek to explore the interactions between the ACE factors, socio-demographic factors and interventions/responses to enable the most effective, earliest response possible in preventing future adversity;
- Wider social benefits: exploring the effect on communities, reducing the number of ACEs experienced and community cohesiveness;
- Detailed examination of the cost-benefits of ACE-informed approaches across sectors and nationally, therefore, allowing the development of a sustainable ACE-informed model when identifying and responding to vulnerability.
- Due to the potential validity issues of using the ARTIC tool that have been identified within the current policing, education and housing cohorts, further work should seek to build on this knowledge by adapting, developing and piloting a tool to measure attitudes towards trauma informed responses and training.

“With all the will in the world, we can do what we think is right but if we can’t get the parents to come in and open a dialogue…. They need to feel that it’s a team effort and nobody’s pointing the finger and saying, it’s your fault…It just needs to be, look, we’ve noticed this, can we work together?” (Report 4)
Moving forward

The key findings and recommendations from “Early Intervention and Prompt Positive Action: Breaking the Generational Cycle of Crime” project have fed directly into a national programme of work to support policing and criminal justice in Wales to build resilience using a public health ‘upstream’ approach to understanding vulnerability and reducing harm and crime. The Early Action Together programme (funded through the Home Office Police Transformation Fund), seeks to develop a national ‘collaborative approach to policing vulnerability in Wales: Developing a multi-agency ACE-informed approach for early intervention and root cause prevention’, working across the four Police Forces in Wales. The objectives of the programme are set out below and are the next phase in this ambitious agenda for Public Health, Policing and Criminal Justice in Wales:

1. Support the development of competent and confident workforce to respond more effectively to vulnerability using an ACE-informed approach in both fast and slow time policing;

2. Assist with a review of the organisational capacity within the wider collaborative partnership to proactively meet the changing demands on frontline services;

3. Explore the feasibility of a 24/7 single integrated ‘front door’ for vulnerability that signposts, supports and safeguards, encompassing welfare and blue light services;

4. Develop a clear plan to move towards a whole system response to vulnerability by implementing ACE-informed approaches for operational policing and key partners.

**Camau Cynnargar gyda’n Gilydd**

**Early Action Together**

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4 Partners include the four Police and Crime Commissioners and the four Chief Constables for South Wales, North Wales, Dyfed-Powys and Gwent, the Director of Her Majesty’s Prison and Probation Service in Wales; the Wales Chief Executive of the Community Rehabilitation Company; the Director of Her Majesty’s Courts and Tribunal Service (Wales); the Director (Wales) of the Youth Justice Board; and the Chair and Chief Executive of Public Health Wales.
Public Health Wales
what we do

We exist to protect and improve health and wellbeing and reduce health inequalities for people in Wales. We work locally, nationally and internationally, with our partners and communities, in the following areas:

- **Health Improvement**
  Providing information, advice and taking action, across sectors, to promote health, prevent disease and reduce health inequalities

- **Health Protection**
  Providing information, advice and taking action to protect people from communicable disease and environmental hazards

- **Microbiology**
  Providing a network of microbiology services which support diagnosis and management of infectious diseases

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- **Health intelligence**
  Providing public health data analysis, evidence finding and knowledge management

- **Safeguarding**
  Providing expertise and strategic advice to help safeguard children and vulnerable adults

- **Screening**
  Providing screening programmes which assist the early detection, prevention and treatment of disease

- **Primary, community and integrated care**
  Strengthening public health impact through policy, commissioning, planning and service delivery

- **NHS quality improvement and patient safety**
  Providing the NHS with information, advice and support to improve patient outcomes

Acknowledgement to Public Health Wales NHS Trust to be stated.

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